## PATENT APPLICATION FEE DETERMINATION RECORD

Ef, ve December 8, 2004

**Application or Docket Number** 10/537153

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		CLAIMS AS FILED - PART I						SMALL	ENTITY			ОТН	—— ED 1	
L	I S. NATION	IAL STAGE FEE		Column 1)		(Column 2)		TYPE		]	OR	SMAL		
r		AL STAGE FEE	s			<u></u> .		RATE	F	EE		RATE	Т	FE
BASIC FEE				SMALL ENT. = \$ 150		RGE_ENT. = \$ 300	7	BASIC, FEE	_	-	ΛÞ.	BASIC FEE	+	
EXAMINATION FEE			Satisfies (4) =	Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200	1	EXAM. FEE		$\dashv$	OK	<del> </del>	4	30
SEARCH FEE			U.S. is IS ALL of	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FE	E	_		EXAM. FEE		20
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =	1			_	•	SEARCH FE		40
TOTAL CHARGEABLE CLAIMS			74	minus 20 =		7 50 =	-	X \$ 125				X \$ 250 =	=	
INDEPENDENT CLAIMS			<del>/</del>		*			X \$ 25 =			DR .	X \$ 50 =	T	
MULTIPLE DEPENDENT CLAIM PRE				minus 3 = ,	•			X \$ 100 =	=		R	X \$ 200 =	†	
_					_			+ \$ 180 =			R	+ \$ 360 =	†	
-	i ule dilleren	nce in column 1 i	s less than	zero, enter "0"	in co	n column 2		TOTAL	1	$\dashv$	R R	TOTAL	4	L.
		CLAIMS AS	AMEND	ED D.S.									<u></u>	
		(Column 1)	VINICIAN	•								OTHER	TH/	AN
		CLAIMS		(Columi HIGHES		(Column 3)		SMALL	ENTITY	_	R 	SMALL ENTIT		
ENTA		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI TIONA FEE	•		RATE	Ti	DDI- ONAL
AMENDMENT	Total	*	Minus	**		=	T	X \$ 25 =		- OF	J	V 6 50	<del> </del>	FEE
	Independent	*	Minus	***		=	F	X \$ 100 =		+	-	X \$ 50 =	<u> </u>	
	FIRST PRE	SENTATION OF N	MULTIPLE D	EPENDENT CL		<del></del>	┢			→ OF	Ľ	X \$ 200 =	L	
								+ \$ 180 =		OF	Ŀ	+\$ 360 =		
				·			•	FEE		OR	TO	OTAL ADDIT. FEE		
_	· .	(Column 1)		(Çolumn	2)	(Column 3)						•		
	·	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUS		PRESENT EXTRA	ſ	RATE	ADDI- TIONAL	7	Γ	RATE		DI-
ļ	Total	AMENDMENT	Minus	PAID FOR	4		L		FEE			INTE	FE	NAL EE
ŀ	ndependent		Minus	<b></b>	_		L	X \$ 25 =		OR	>	<b>(\$50 =</b>		
H		<u> </u>	Minus	***	. • =		Lx	\$ 100 =		OR	X	\$ 200 =		
L	FIRST PRES	ENTATION OF MI	ULTIPLE DE	PENDENT CLAI	M		+	\$ 180 =		OR	+	\$ 360 =		
							TO	TAL ADDIT.		OR		TAL ADDIT.		

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.